Attorney Docket No. 402869/NIH DHHS Ref. No. E-319-2003/0-US-1

PSU: 2003-2823

## COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION AND POWER OF ATTORNEY

<ul><li>☑ Declaration Submitt</li><li>☑ Declaration Submitt</li></ul>		ng OR ng (surcharge (37 CFR 1	.16(e)) required)		
As a below named inven	tor, I hereby decla	re that:			
first, and sole inventor (	if only one name i.	zenship are as stated bel s listed below) or an orig claimed and for which a	inal, first, and joint inv	entor (if plural name.	
NEURAL NETWO		RECOGNITION FOR I G PATIENT CHARAC		RMACODYNAMIC	S
the specification of whic	h:				
was fi	iled by Express M (if applicable).	4.1	d was amended on cation No. not known blication No. PCT/	(if applicable). yet, and was amende and was amende	
I state that I have review as amended by any amen		I the contents of the spec above.	ification identified abo	ve, including the claim	m(s),
including for continuation	on-in-part applicati	rmation which is materi ons, material information PCT international filing	n which became availa	ble between the filing	
inventor's or plant bree least one country other t the box, any foreign app certificate(s), or any PC'	der's rights certifi- han the United Sta- plication(s) for pat I international app the same subject n	USC 119(a)-(d) or (f), o cate(s), or 365(a) of any ates of America, listed be ent, utility model, designation (s) designating a matter and having a filing	y PCT international ap elow and have also ide in registration, inventor t least one country other	plication(s) designation intified below, by check is or plant breeder's rearth than the United State	ng at cking rights tes of
Prior Foreign		Foreign Filing Date	Priority Claimed	Certified Copy Attack	
Application Number(s)	Country	(MM/DD/YYYY)	YES NO	YES NO	
					<u> </u>
				<del>                                     </del>	_

( In re Appln. of URQUIDI-MACDONALD et al. Attorney Docket No. 402869/NIH

NIH Declaration DC (Revised 7/23/03)

As a named inventor, I hereby appoint the National Institutes of Health, Office of Technology Transfer, 6011 Executive Blvd., Ste. 325, Rockville, Maryland 20852-3804, Telephone (301) 496-7056, as Principal Attorneys and to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith: Customer Number 05318.

05318

Please recognize Leydig, Voit & Mayer as Associate Attorneys in this case: Customer Number 23548.

23548

I further direct that correspondence concerning this application be directed to Leydig, Voit & Mayer: Customer Number 23548.

23548

I declare that all statements made herein of my own knowledge are true, that all statements made on information and belief are believed to be true, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Mirna URQUIDI-MACDONALD	
Inventor's signature we don alo	
Inventor's signature	Country of Citizenship: US
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Full name of second joint inventor, if any: Darrell ABERNETHY	
Inventor's signature	
Date	Country of Citizenship: US
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In re Applin, of URQUIDI-MACDONALD et al. Attorney Docket No. 402869/NH

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Inventur's signature		· .			Country of Citizenship: U	s
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				• •	· ·	
Full name of second Joint inventor if an	y: Darrell Al	BERNETH	Y		• •	•
Inventor's signature	K		<del></del> -			
Date 3/29/04	-		-		Country of Citizenship: U	ıs
Residence: Annapolis, MD (city/state or country)			·		• • • • • • • • • • • • • • • • • • • •	
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NIH Declaration DC (Revised 7/23/03)